



Please type a plus sign (+) inside this box →

PTO/SB/01 (12-97)

Approved for use through 9/30/00. OMB 0851-0032

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration Submitted with Initial Filing OR Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	1/1475
First Named Inventor	Heinz-Gerd KLAES
<u>COMPLETE IF KNOWN</u>	
Application Number	10 / 809,060
Filing Date	March 25, 2004
Group Art Unit	To be assigned
Examiner Name	To be assigned

As a below named Inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

PHARMACEUTICAL COMPOSITION OF ANTIVIRAL AGENTS

the specification of which
 is attached hereto
OR
 was filed on (MM/DD/YYYY) 03/25/2004 United States Application Number or PCT International

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(e) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application for which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
YES	NO				
03029507.5	EP	12/20/2003	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
03016224.2	EP	07/17/2003	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
03007001.5	EP	03/27/2003	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto.
-----------------------	--------------------------	--

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



Please type a plus sign (+) inside this box →

Approved for use through 9/30/00. OMB 0651-0032

Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

PTO/SB/01 (12-97)

DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 385(c) of any PCT International application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (If applicable)

Additional U.S. or PCT International application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named Inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: Customer Number → Place Customer Number Bar Code Label
 OR
 Registered practitioner(s) name/registration number listed below

Name	Registration Number	Name	Registration Number
Robert P. Raymond	25,089	Anthony P. Dotino	41,629
Michael P. Morris	34,513	Susan K. Poccia	45,016
Mary-Ellen M. Devlin	27,928	Philip I. Datlow	41,482
Alan R. Stempel	28,991	David A. Dow	46,124
Timothy X. Witkowski	40,232	Andrea D. Small	54,859

Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: Customer Number or Bar Code Label OR Correspondence address below

Name			
Address			
Address			
City	State	ZIP	
Country	Telephone	Fax	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:	<input type="checkbox"/> A petition has been filed for this unsigned Inventor				
Given Name (first and middle if any)		Family Name or Surname			
Heinz-Gerd	KLAES				
Inventor's Signature					Date
Residence: City	Gau-Bickelheim	State	Country	Germany	Citizenship
Post Office Address	Ludwig-Jahn-Strasse 16				
Post Office Address					
City	Gau-Bickelheim	State	ZIP	55599	Country
					Germany

Additional Inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto



PTO/SB/02A (08-03)
Approved for use through 07/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION		ADDITIONAL INVENTOR(S)	
		Supplemental Sheet	
		Page 1 of 1	

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned Inventor		
Given Name (first and middle (if any))		Family Name or Surname		
Elena		KOUNDOURAKIS		
Inventor's Signature		Date		
Residence: City	Danbury	State	CT	Country USA
Mailing Address		900 Ridgebury Road		
Mailing Address				
City	Ridgefield	State	CT	Zip 06877 Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned Inventor		
Given Name (first and middle (if any))		Family Name or Surname		
Herman		VALDEZ		
Inventor's Signature		Date		
Residence: City	Somers	State	NY	Country USA
Mailing Address		900 Ridgebury Road		
Mailing Address				
City	Ridgefield	State	CT	Zip 06877 Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned Inventor		
Given Name (first and middle (if any))		Family Name or Surname		
Douglas Lytle		MAYERS		
Inventor's Signature		Date		
Residence: City	Newtown	State	CT	Country USA
Mailing Address		900 Ridgebury Road		
Mailing Address				
City	Ridgefield	State	CT	Zip 06877 Country USA

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.

Docket No. 1/1475



Please type a plus sign (+) inside this box → +

PTO/SB/01 (12-97)

Approved for use through 9/30/00, OMB 0651-0032
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration Submitted with Initial Filing OR Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	1/1475
First Named Inventor	Heinz-Gerd KLAES
COMPLETE IF KNOWN	
Application Number	10 / 809,060
Filing Date	March 25, 2004
Group Art Unit	To be assigned
Examiner Name	To be assigned

As a below named Inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

PHARMACEUTICAL COMPOSITION OF ANTIVIRAL AGENTS

the specification of which

(Title of the Invention)

 is attached hereto

OR

 was filed on (MM/DD/YYYY) 03/25/2004 as United States Application Number or PCT InternationalApplication Number 10/809,060 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(e) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES	Certified Copy Attached? NO
03029507.5	EP	12/20/2003	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
03016224.2	EP	07/17/2003	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
03007001.5	EP	03/27/2003	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

 Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
		<input type="checkbox"/>

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



Please type a plus sign (+) inside this box

Approved for use through 9/30/00, OMB 0651-0032

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

PTO/SB/01 (12-97)

DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

Additional U.S. or PCT International application numbers are listed on a supplemental priority date sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: Customer Number Registered practitioner(s) name/registration number listed below Place Customer Number Bar Code Label here

Name	Registration Number	Name	Registration Number
Robert P. Raymond	25,089	Anthony P. Bottino	41,629
Michael P. Morris	34,513	Susan K. Pochiari	45,016
Mary-Ellen M. Devlin	27,928	Philip I. Daltow	41,482
Alan R. Stempel	28,991	David A. Dow	46,124
Timothy X. Wilkowski	40,232	Andrea D. Small	54,859

Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: Customer Number or Bar Code Label 28501 OR Correspondence address below

Name			
Address			
Address			
City	State	ZIP	
Country	Telephone	Fax	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: A petition has been filed for this unsigned inventor

Given Name (first and middle if any)	Family Name or Surname
Heinz-Gerd	KLAES

Inventor's Signature				Date	
Residence: City	Gau-Bickelheim	State	Country	Germany	Citizenship
Post Office Address	Ludwig-Jahn-Strasse 16				
Post Office Address					
City	Gau-Bickelheim	State	ZIP	55599	Country
					Germany

Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto



PTO/SB/02A (08-03)

Approved for use through 07/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet

Page 1 of 1

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle (if any))		Family Name or Surname		
Elena		KOUNDOURAKIS		
Inventor's Signature				Date 5/12/04
Residence: City Danbury	State CT	Country USA	Citizenship GR	
Mailing Address 900 Ridgebury Road				
Mailing Address				
City Ridgefield	State CT	Zip 06877	Country USA	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle (if any))		Family Name or Surname		
Hernan		VALDEZ		
Inventor's Signature				Date 5/12/04
Residence: City Somers	State NY	Country USA	Citizenship PE	
Mailing Address 900 Ridgebury Road				
Mailing Address				
City Ridgefield	State CT	Zip 06877	Country USA	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle (if any))		Family Name or Surname		
Douglas Lytle		MAYERS		
Inventor's Signature				Date 12 May 2004
Residence: City Newtown	State CT	Country USA	Citizenship US	
Mailing Address 900 Ridgebury Road				
Mailing Address				
City Ridgefield	State CT	Zip 06877	Country USA	

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.

Docket No. 1/1475